

29 SEP 2006

MULTIPLE DEPENDENT CLAIM
FEE CALCULATION SHEET
(FOR USE WITH FORM PTO-875)

SERIAL NO.

FILING DATE

10/562769

APPLICANT, ..

CLAIMS

	AS FILED		AFTER 1 ST AMENDMENT		AFTER 2 ND AMENDMENT	
	IND.	DEP.	IND.	DEP.	IND.	DEP.
1	1		1			
2			0			
3	1		0			
4	0		0			
5	1		1			
6	1		1			
7	1		1			
8	1		1			
9	1		1			
10	1		1			
11	1		1			
12	0		1			
13	0		1			
14	0		1			
15	0		1			
16	0		1			
17	0		1			
18	0		1			
19	0		1			
20	0		1			
21	0		1			
22	0		1			
23	0		1			
24	1		1			
25	1		1			
26	1		1			
27	1		1			
28	1		1			
29	5		1			
30	02		1			
31	02		2			
32	02		2			
33	02		2			
34	02		2			
35	02		2			
36	02		1			
37	02		1			
38	02		1			
39	1		1			
40	6		1			
41	0		1			
42	0		1			
43	0		2			
44			1			
45						
46						
47						
48						
49						
50						
TOTAL IND.	6	↓	4	↓		↓
TOTAL DEP.	37	↶	47	↶		↶
TOTAL CLAIMS	43	↓	61	↓		↓

	AS FILED		AFTER 1 ST AMENDMENT		AFTER 2 ND AMENDMENT	
	IND.	DEP.	IND.	DEP.	IND.	DEP.
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99						
100						
TOTAL IND.		↓		↓		↓
TOTAL DEP.		↶		↶		↶
TOTAL CLAIMS		↓		↓		↓

LAST AVAILABLE COPY